

02:42pm From-Affymetrix, Inc.

408 731 5392

T-142 P.006/013 F-752

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unless it contains a valid OMB control number.

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted With Initial Filing    OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	3555.1
	First Named Inventor	Kapranov
	<b>COMPLETE IF KNOWN</b>	
	Application Number	10/736,054
	Filing Date	12/15/2003
	Group Art Unit	TBA
	Examiner Name	TBA

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Methods for analyzing global regulation of coding and non-coding RNA transcripts involving low molecular weight RNAs**the specification of which *(Title of the Invention)*☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **12/15/2003** as United States Application Number or PCT InternationalApplication Number **10/736,054** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

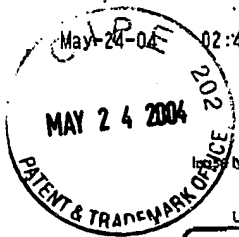
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/438,944	01/08/2003	
60/438,866	01/08/2003	

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 3852 of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith ☒ Customer Number 22885 

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☐ OR ☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number


☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.Direct all correspondence to: ☒ Customer Number or Bar Code Label 22885 OR ☒ Correspondence address below

Name			
Address			
Address			
City	State	CA	ZIP
Country	Telephone		Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

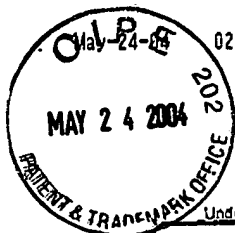
Given Name (first and middle (if any))	Family Name or Surname
Philipp	Kapranov

Inventor's Signature  Date 4/22/04Residence: City Sunnyvale State CA Country US Citizenship UkrainePost Office Address 120 E. Remington Dr. Apt. 108

Post Office Address

City Sunnyvale State CA ZIP 94087 Country US☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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## DECLARATION

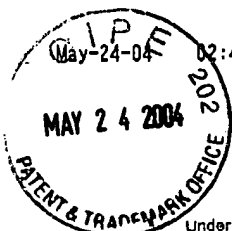
ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Page 3 of 4

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Dione		Kampa	
Inventor's Signature <i>Dione Kampa</i>		Date 5/24/2004	
Residence: City <i>mt view</i>	State <i>CA</i>	Country <i>US</i>	Citizenship <i>US</i>
Mailing Address <i>714 Sylvan Ave</i>			
Mailing Address			
City <i>mt. view</i>	State <i>CA</i>	Zip <i>94041</i>	Country <i>US</i>
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Thomas R.		Gingeras	
Inventor's Signature <i>Thomas R. Gingeras</i>		Date 5/21/04	
Residence: City <i>Encinitas</i>	State <i>CA</i>	Country <i>US</i>	Citizenship <i>US</i>
Mailing Address <i>1541 Crest Drive</i>			
Mailing Address			
City <i>Encinitas</i>	State <i>CA</i>	Zip <i>92024</i>	Country <i>US</i>
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Stefan		Bekiranov	
Inventor's Signature X <i>Stefan Bekiranov</i>		Date 5/24/04	
Residence: City <i>Oakland</i>	State <i>CA</i>	Country <i>US</i>	Citizenship <i>US</i>
Mailing Address <i>5508 Broadway</i>			
Mailing Address			
City <i>Oakland</i>	State <i>CA</i>	Zip <i>94618</i>	Country <i>US</i>

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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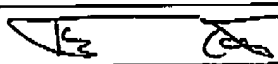
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**DECLARATION**ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Page 4 of 4

Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname			
Simon			Cawley			
Inventor's Signature				Date		
Residence: City		Oakland	State		CA	
Country		US		Citizenship		US
Mailing Address 5343 Broadway Terrace; #404						
Mailing Address						
City		Oakland	State		CA	
ZIP		94618		Country		US
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname			
Kyle B.			Cole			
Inventor's Signature 				Date 5/24/04		
Residence: City		Stanford	State		CA	
Country		US		Citizenship		US
Mailing Address Governor's Corner Residential Office						
Mailing Address						
City		Stanford	State		CA	
Zip		94305-8582		Country		US
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))			Family Name or Surname			
Inventor's Signature				Date		
Residence: City		State		Country		Citizenship
Mailing Address						
Mailing Address						
City		State		Zip		Country

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DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☐ Declaration  
Submitted  
With Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number 3555.1

First Named Inventor Kapranov

**COMPLETE IF KNOWN**

Application Number 10/736,054

Filing Date 12/15/2003

Group Art Unit TBA

Examiner Name TBA

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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the specification of which (Title of the invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

12/15/2003

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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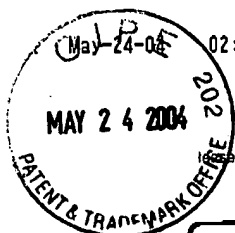
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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

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☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

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☒ Customer Number  
or Bar Code Label

22886

OR

☒ Correspondence address below

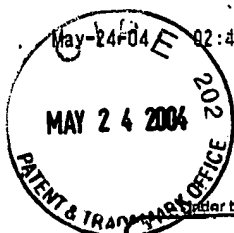
Name					
Address					
Address					
City		State	CA	ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Philipp		Kapranov			
Inventor's Signature				Date	
Residence: City	State	Country	Citizenship		
Post Office Address					
Post Office Address					
City	State	ZIP	Country		

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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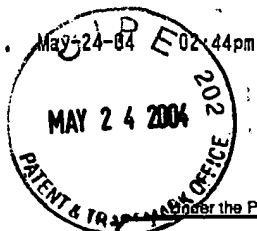
**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet

Page 3 of 4

<b>Name of Additional Inventor, if any</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Olone		Kampa	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
<b>Name of Additional Inventor, if any</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Thomas R.		Gingeras	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Encinitas	CA	US	US
Mailing Address 1541 Crest Drive			
Mailing Address			
City	State	Zip	Country
Encinitas	CA	92024	US
<b>Name of Additional Inventor, if any</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Stefan		Bekiranov	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Oakland	CA	US	US
Mailing Address 5508 Broadway			
Mailing Address			
City	State	Zip	Country
Oakland	CA	94618	US

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 4 of 4

<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Simon				Cawley	
Inventor's Signature <i>Simon Cawley</i>				Date <i>5/21/04</i>	
Residence: City		State	Country	Citizenship	
Oakland		CA	US	Ireland	
Mailing Address					
5671 Estates Dr					
Mailing Address					
City		State	ZIP	Country	
Oakland		CA	94618	US	
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Kyle B.				Cole	
Inventor's Signature				Date	
Residence: City		State	Country	Citizenship	
Stanford		CA	US	US	
Mailing Address					
Governor's Corner Residential Office					
Mailing Address					
City		State	ZIP	Country	
Stanford		CA	94305-8582	US	
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Inventor's Signature				Date	
Residence: City		State	Country	Citizenship	
Mailing Address					
Mailing Address					
City		State	ZIP	Country	

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